

## REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14) (CFA-4) Summary Sheet

FILE NUMBER

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? Yes No

TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION	electrony (			
Full Name of Committee (as on Statement of Organization)  Check if this is a new result.	name	TRUCTIONS FO	SPECIALIN	
Chrolie Grean for Trustee		A ESTACIONAC		
2. Acronym or Abbreviated Name (if any)	3. Committee Telephone Number			
	(317) 485-7735			
4. Mailing Address (address where all campaign finance correspondence is received) C	heck if this is a ne	ew address	tures parties from	
5. City. State. ZIP Code	6. Party Affiliation (if applicable)			
NoBlesodle, a 46061	books and all the course the same of the same of the same			
CANDIDATE INFORMATION (For Candidate's C				
7. Full Name of Candidate (include any nickname)	8. Party Affiliation or If Independent Candidate			
Charles Charles S. Green	ENDEPENDENT			
Office Sought (Include district number, if any. Not required for exploratory committee.)	10. County of Residence			
CUAJNE TOWNShip Trustee / 1935 55500	1/1900	elta	emiglia nedamican agric	
TYPE OF REPORT		CONVENTION	N CANDIDATES ONLY	
11. Check one:		Check one:	ARC mid F. notestinon C	
□ Pre-Primary □ Pre-Slection □ Annual □ Nomination ☑ Other PetstoN		Pre-Conv		
Final/Disbands Committee (lines 18, 19, and 20 must be "0") Utgoing Treasurer (within 10 days amend Statement of	of Organization)	Post-Con	vention	
12. Reporting Period:	The second second	COLUMN A	COLUMN B	
From: July Through: Oct 13, 06		This Period	Year to Date	
13. Cash on hand and investments at the beginning of this reporting period.	4	10000		
14. Cash on hand and investments January 1, current year.	000 JUSE/0		w	
CONTRIBUTIONS AND RECEIPTS				
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		-	100	
15a. Itemized (use Schedule A)		100-	100-	
15b. Unitemized		100.00	100	
	TOTAL		49 TH Select Street Inches	
	TOTAL /	00.00		
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan repayments.)	O SEEDI LAA TOOM		and the state of the state of the state of	
17a. Itemized (use Schedule B) (Public Question: use Schedule C)		0-	ed any struct Asset Police	
17b. Unitemized	1670 0 6 0+	0-	LL IP TOUR DECORDS	
17c. Add lines 17a and 17b in both columns SUE	STOTAL -	0-	English States	
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL /2	DO. 00	2.2	
19. Debts OWED BY the committee (use Schedule D)	THE THE PERSON NAMED IN	0-11		
20. Debts OWED TO the committee (use Schedule E)	HE BOOKEN HE	0		

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CERTIFICATION

Signature on File

FOR OFFICE USE ONLY





## REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

## (CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts <u>totaled on ITEM 15a</u> of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER					
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Page	of				

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CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED
(street, number, city, state, ZIP code)		PERIOD	YEAR-TO-DATE	RECEIVED BY
P.O. Box 1326	Contributions: Direct In-Kind (describe)	\$ 100.00	estivo unilam	7-15-06
NOBLASUELLE, DA	Other Receipts: Interest Loan Misc. (specify)	on tent available of	Seen Antiles Sono o le nesi	e risdly (TMAT)
Contributor's Occupation (if required)	to proper above sext orbit	lautivitate yes h	nonaccos ent	PATRON: Enter
2.	Contributions: Direct In-Kind (describe)	O FRIEGER A	HEO RE HOT	desugna desugna contribu
	Other Receipts: Interest Loan Misc. (specify)	THE SET SHIPS	o bestvere sav	alcard to a
Contributor's Occupation (if required)			ponen period	money and of a
3.	Contributions: Direct In-Kind (describe)	draes Breezh	TIVE YEAR-TO	COMMOD 2 MA
Per at access and coopey orders are secured and coopey and coopey orders are secured as a secured and a secured an	Other Receipts: Interest Loan Misc. (specify)	organis ett i tee organis various various voitante organis	connected description of the control	BECCIVED: E
Contributor's Occupation (if required)	200	a se policia	CO BYE BYONUS	17 S 1240 104
4.	Contributions: Direct In-Kind (describe)	soon only recons	estimuo sil	rung or 5 devi
ILE A.  VOLUME LAST PAGE ONLY 18 1 1 21	Other Receipts: Interest Loan Misc. (specify)	of reinit is 32 50 JATO Foot	E OF SCHEOL	hedus, the figur
Contributor's Occupation (if required)	DESCRIPTION OF THE PERSON OF T	nupil are tens o	IA A el certo	to anceo la lo
5.	Contributions:  Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (if required)				
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 100.00		S CONTRACTOR
TOTAL OF ALL PAGES OF SCHEDULE		\$		
Lines total Off II Li				